



# SPCA Eastern Shore

## VOLUNTEER APPLICATION

### VOLUNTEER INFORMATION

Name:	
Street Address:	
Cit/State/Zip:	
Phone:	
Email Address:	
Emergency Contact:	
Age:	<input type="checkbox"/> 18-30 <input type="checkbox"/> 31-40 <input type="checkbox"/> 41-55 <input type="checkbox"/> 55+

How Did You Hear About Our Volunteer Program?

### SPCA EASTERN SHORE VOLUNTEER PROGRAM BASIC REQUIREMENTS

Thank you for your interest in the SPCA Eastern Shore Adult Volunteer Program. We are extremely flexible about the number of hours worked by volunteers, but do have some minimum requirements. Our Adult Volunteers:

1. Must be at least 18 years of age
2. Must attend a general orientation
3. Depending on the area(s) to which you are assigned, may require additional training.
4. Are expected to participate in at least one activity per year to stay on the roster

### SPCA EASTERN SHORE VOLUNTEER OPPORTUNITIES

The SPCA Eastern Shore offers three main areas of volunteer opportunity. You may choose to participate in more than one area.

**Animal Care:** Assist with care, training, socialization and adoption of animals in the shelter.

**Administrative:** Assist in our office. Answer phones, do computer work, assist visitors.

**Fundraising and Special Events:** Help us plan and carry out the events that help keep the shelter open! Larger events include the Best Friends Walk Together Pet Walk. Volunteers are needed to staff adoption and merchandise tables at community events.

**AREAS OF INTEREST**

	Dog Walking/Training
	Cat Socialization
	Administrative
	Adoption Follow-Up Calls
	Special Events: Specific Interests
	Photography
	Computer Work

**AVAILABILITY**

Shelter hours: Tues through Sat	8:00 am to 2:30 pm
Comments:	

**VOLUNTEER EXPERIENCE/HISTORY**


**PREVIOUS EXPERIENCE WITH THE SPCA EASTERN SHORE**

	Pet Adopter
	Member
	Donated Supplies
	Attended Special Events
	Other:

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

## Eastern Shore SPCA Release and Waiver of Liability

This Release and Waiver of Liability (the “release”) executed on (date) \_\_\_\_\_ by (name of volunteer candidate) \_\_\_\_\_ (“Volunteer”) releases the Eastern Shore SPCA (“Nonprofit”), a nonprofit corporation organized and existing under the laws of the Commonwealth of Virginia including each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for Nonprofit and engage in activities related to serving as a volunteer \_\_\_\_\_ [insert title of volunteer service].

Volunteer understands that the scope of Volunteer’s relationship with Nonprofit is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that Nonprofit will not provide any benefits traditionally associated with employment to Volunteer, and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer’s service to Nonprofit.

1. **Waiver and Release:** I, the Volunteer, release and forever discharge and hold harmless Nonprofit and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Nonprofit. I understand and acknowledge that this Release discharges Nonprofit from any liability or claim that I may have against Nonprofit with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Nonprofit or occurring while I am providing volunteer services.
  
2. **Insurance:** Further I understand that Nonprofit does not assume any responsibility for or obligation to provide me financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness death or damage to my property. I expressly waive any such claim for compensation or liability on the part of Nonprofit beyond what may be offered freely by Nonprofit in the event of such injury or medical expenses incurred by me.
  
3. **Medical Treatment:** I hereby Release and forever discharge Nonprofit from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with Nonprofit.
  
4. **Assumption of Risk:** I recognize working with animals places me at risk. I understand that because I may handle animals it is important for me to speak with my physician about the **tetanus and rabies pre-exposure vaccinations**. As a Volunteer I hereby expressly assume the risk of injury or harm from these activities and Release Nonprofit from all liability for injury, illness, death or property damage resulting from the services I provide as volunteer or occurring while I am providing volunteer services.
  
5. **Criminal Charges:** I certify that I have never been convicted of animal cruelty, neglect or abandonment, or any offense involving the physical or sexual abuse of a child, or any felony.

6. **Community Service:** I am advised that if volunteer hours are to be used for community service or any other application that is ordered by the judicial system that I must schedule these hours with the Community Service Coordinator otherwise the hours will not count toward community service.
  
7. **Photographic Release:** I grant and convey to Nonprofit all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by Nonprofit in connection with my providing volunteer services to Nonprofit.
  
8. **Representation of SPCA and Logo:** I recognize that I am NOT to use the SPCA Eastern Shore logo or represent the SPCA Eastern Shore without the express permission of the Management of the SPCA Eastern Shore. If I am found to be representing the SPCA Eastern Shore in an inappropriate or defamatory manner, the SPCA Eastern Shore reserves the right to dismiss me as a volunteer and/or limit my access to the facility.
  
9. **Other:** As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Virginia and that this release shall be governed by and interpreted in accordance with the laws of the Commonwealth of Virginia. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into the Release and Waiver liability willingly and voluntarily.

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Signature (Volunteer)

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Date

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Signature Legal Guardian (if under 18 years of age)

**S. P. C. A. Eastern Shore**  
**P. O. Box 164**  
**Onley, Virginia 23418**  
**(757) 787-7385**

In accordance with the Commonwealth of Virginia Code 3.1-796-.96:2 B: Each animal shelter shall obtain a signed statement from each of its directors, operators, staff and animal caregivers specifying that the individual has never been convicted of animal cruelty, neglect or abandonment, and each animal shelter shall update such statement as changes occur.

I, \_\_\_\_\_, have never been convicted of animal cruelty, neglect or abandonment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_